

**Amended Interim Designation of Agent to Receive Notification
of Claimed Infringement**

Full Legal Name of Service Provider: Laser Link Net, Inc.

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): _____

Address of Service Provider: 112 Chesley Drive, Media, PA 19063

**Name of Agent Designated to Receive
Notification of Claimed Infringement:** Margaret Robbins

Full Address of Designated Agent to which Notification Should be Sent (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):

3420 Central Expressway, Santa Clara, CA 95051

Telephone Number of Designated Agent: (408) 616-6509

Facsimile Number of Designated Agent: (408) 616-6604

Email Address of Designated Agent: copyright@covad.com

Identify the Interim Designation to be Amended, by Service Provider Name and Filing Date, so that it may be Readily Located in the Directory Maintained by the Copyright Office: Laserlink Net, Inc., 1/29/02

Signature of Off _____ representative of the Designating Service Provider:
Date: May 22, 2002

Typed or Printed Name and Title: Margaret Robbins, Assoc. General
Counsel

Note: This Amended Interim Designation Must be Accompanied by a \$20 Filing Fee Made Payable to the Register of Copyrights.

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